

AWARDS RECOMMENDATION NETPDTC 12451/1 (REV 06-03)						1. PERIOD COVERED BY THIS AWARD FROM: TO:		
2. EMPLOYEE NAME (LAST, FIRST, MI)			3. SSN		4. PAY PLAN/SERIES/ GRADE/STEP		5. CODE/LOCATION:	

6. INDICATE TYPE OF AWARD RECOMMENDED							
<input type="checkbox"/>	A. QUALITY STEP INCREASE (AWARD MUST BE BASED ON CURRENT OUTSTANDING RATING OF RECORD)						
<input type="checkbox"/>	B. SPECIAL ACT/ SERVICE AWARD (COMPLETE INTANGIBLE/TANGIBLE ESTIMATE OF BENEFITS; ANYTHING OVER \$750 REQUIRES CO APPROVAL)					C. AMOUNT RECOMMENDED	
<input type="checkbox"/>	D. ON-THE-SPOT AWARD (ANYTHING OVER \$750 REQUIRES CO APPROVAL)					E. AMOUNT RECOMMENDED	
<input type="checkbox"/>	F. TIME-OFF AWARD (ANYTHING OVER 8 HOURS REQUIRES CO APPROVAL)					G. NUMBER HOURS RECOMMENDED	H. DATE MUST BE USED BY
<input type="checkbox"/>	I. MERITORIOUS AWARD (REQUIRES CO APPROVAL)						
<input type="checkbox"/>	J. SUPERIOR AWARD (REQUIRES NETC APPROVAL)						

7. ESTIMATE OF BENEFITS								
A. INTANGIBLE BENEFITS	<input type="checkbox"/>	SAFETY	<input type="checkbox"/>	IMPROVED METHOD	<input type="checkbox"/>	MORALE	<input type="checkbox"/>	OTHER (SPECIFY)
B. VALUE	<input type="checkbox"/>	MODERATE	<input type="checkbox"/>	SUBSTANTIAL	<input type="checkbox"/>	HIGH	<input type="checkbox"/>	EXCEPTIONAL
C. EXTENT OF APPLICATION	<input type="checkbox"/>	LIMITED	<input type="checkbox"/>	EXTENDED	<input type="checkbox"/>	BROAD	<input type="checkbox"/>	GENERAL

8. TANGIBLE BENEFITS (IN TABLE BELOW COMPUTE							
ITEM	LABOR			MATERIAL			TOTAL (LABOR AND MATERIALS)
	MAN HOURS PER	DOLLARS PER	TOTAL	UNITS PER	COST PER UNIT	TOTAL	
A. FORMER METHOD							
B. NEW METHOD							
C. SAVINGS							

9. JUSTIFICATION (BRIEFLY DESCRIBE HOW EMPLOYEE WAS EXEMPLARY, I.e., EXCEEDED JOB REQUIREMENTS, ACT OF HEROISM, ETC.)

10. SUPERVISOR'S SIGNATURE						11. DATE	
12. DEPARTMENT DIRECTOR'S/SPECIAL ASSISTANT'S REVIEW <input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED				13. DEPARTMENT DIRECTOR'S/SPECIAL ASSISTANT'S SIGNATURE		14. DATE	15. N8 INITIAL
16. COMMANDING OFFICER'S REVIEW (IF OVER \$750 OR 8 HRS) <input type="checkbox"/> APPROVED \$ <input type="checkbox"/> DISAPPROVED				17. COMMANDING OFFICER'S SIGNATURE		18. ACTIVITY	19. DATE

20. HRO INTERNAL USE ONLY	
21. DATE RECEIVED BY HRO	22. ACTION FORWARDED TO PAYROLL